PTO/SB/47 (03-09) Approved for use through 0.33112012. OMB 0851-0016.
U.S. Patent and TradeAmark Office, U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unlies it displays a valid OMB control number.

"FEE ADDRESS" INDICATION FORM

Address to: Mail Stop M Correspondence Commissioner for Patents - OR - P.O. Box 1450 Alexandria, VA 22313-1450	Fax to: 571-273-6500
INSTRUCTIONS: The issue fee must have been paid for application(s) listed on this form. In addition, only an address represented by a Customer Number can be established as the fee address for maintenance fee purposes thereafter, fee address). A fee address should be established when correspondence related to maintenance fees should be mailed to a different address than the correspondence address for the application. When to check the first box below: If you have a Customer Number representing the desired fee address, in which case a completed Request for Customer Number representing the desired fee address, in which case a completed Request for Customer Number (PTO/SB/125) must be attached to this form. For more information on Customer Numbers, see the Manual of Patent Examining Procedure (MPEP) § 403.	
For the following listed application(s), please recognize as the "Fee Address" under the provisions of 37 CFR 1.363 the address associated with:	
Customer Number: 24536	
OR	
The attached Request for Customer Number (PTO/SB/125) form.	
PATENT NUMBER ((f known)	APPLICATION NUMBER
6969728	
Completed by (check one):	
Applicant/Inventor	/Bart G. Newland/
	Signature
Attorney or Agent of record(Reg. No.)	Bart G. Newland Typed or printed name
Assignee of record of the entire interest. See 37 CFR 3.71. 781-434-3570	
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)	Requester's telephone number
Assignee recorded at Reel 012163 Frame 0001	April 15, 2009
Date NOTE: Signatures of all the inventors or assignces of record of the entire interest or their representative(s) are required. Submit multiple forms if more that one signature is required, see below.	
* Total of forms are submitted.	

Trademarks of the Commerce of the Commerce of Commerce O. O. Box 1450, Alex andrig, Vx 2231-1450, DOWN ESPID COMPLETE D FORMS TO THIS A DORSES.

SEND TO MAN SEND TO THIS OF COMMERCE OF C